04 09/02/01 at No. #5

TRAN	SMITTAL OF	SURE STATEMENT (c))	Docket No. 20784/5				
In Re A		nder 37 CFR 1.97(b) or 1.97(
- Vig	9/745,883	Filing Date December 21, 2000	Examiner NOT YET ASSIGNED	Group Art Unit NOT YET ASSIGNED			
Title:	COMPOUNDS C	OF UNSTABLE DP IV INHIBITO	ORS				
		Assistant Com	ddress to: missioner for Patents ton, D.C. 20231	· · · · · · · · · · · · · · · · · · ·			
		37 C	FR 1.97(b)				
1. 🖾	Out and submitted berewith is being filed within three months of the filing						
		37 C	FR 1.97(c)				
2. 🗖	The Information Disclosure Statement submitted herewith is being filed after three months of the filing of a national application, or the date of entry of the national stage as set forth in 37 CFR 1.491 in an international application; or after the mailing date of a first Office Action on the merits, whichever occurred last but before the mailing date of either:						
	1. '	a Final Action under 37 CFR 1.	113, or \				
	2.	a Notice of Allowance under 37	CFR 1.311,				
	whiche	ver occurs first.					
	Also submitted	herewith is:					
	a certific	ation as specified in 37 CFR 1.97	7(e);				
		OR					
	the fee under 37	set forth in 37 CFR 1.17(p) for 7 CFR 1.97(c).	submission of an Information [Disclosure Statement			

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P10A/REV01

			Docket No.				
TRANSMITTAL OF INFORMATION DISCLOSURE STATEMENT (Under 37 CFR 1.97(b) or 1.97(c)) Docket No. 20784/5							
In Re Application Of I	Demuth, et al						
APR 0 2 2000							
		Eveniner	Group Art Unit				
erial No.	Filing Date	Examiner					
09/745,883	December 21, 2000	NOT YET ASSIGNED	NOT YET ASSIGNED				
Till COMPOUNDS	OF UNSTABLE DP IV INHIBITO	DRS					
Title: COMPOUNDS	OF UNSTABLE DI IV INIIDITO						
	Dove	ant of Egg					
	(Only complete if Applicant elects	nent of Fee to pay the fee set forth in 37 CFR	1.17(p))				
	(Omy complete if Applicant election						
☐ A check in the amount of is attached.							
☐ The Assistant Co	ommissioner is hereby authorized	I to charge and credit Deposit	t Account No.				
as described hel	ow. A duplicate copy of this shee	et is enclosed.					
	the amount of						
	ny overpayment.						
	any additional fee required.						
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Date)		20231.	00.400				
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l	Signature	Signature of Person	n Mailing Correspondence				
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